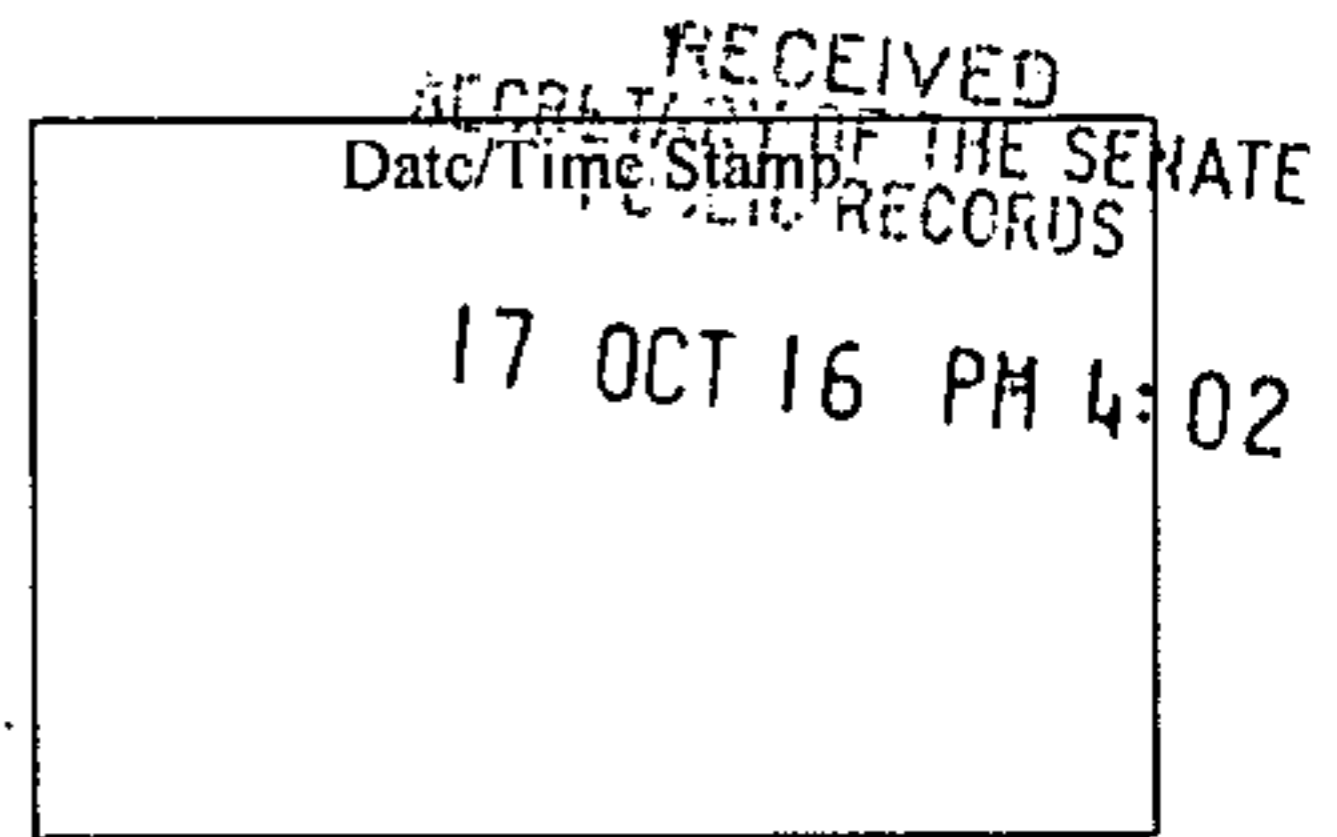


# COVER SHEET FOR AMENDMENT OF POST-TRAVEL SUBMISSION



**Instructions:** Use this form as a cover sheet for any paperwork you may need to submit to the Office of Public Records in order to make your Privately Sponsored Post-Travel Submission complete in accordance with Rule 35. Only complete this form if you need to submit an amendment to a post-travel filing you have already submitted.

SUBMIT DIRECTLY TO THE OFFICE OF PUBLIC RECORDS IN 232 HART BUILDING

Name of Traveler: Joe Britton  
Employing Office/Committee: Office of Senator Martin Heinrich  
Travel Expenses Paid by (List all sources): Pew Charitable Trusts  
Travel Date(s): 9/15/17 - 9/17/17  
Description/Title of Attached Forms: Changes made to Cover sheet

Purpose of Amendment (describe the reason for amending original submission): To account for additional expenses

10/16/17  
(Date)

[Signature]  
(Signature of Traveler)

# Employee Post-Travel Disclosure of Travel Expenses

Date/Time Stamp:

**Post-Travel Filing Instructions:** Complete this form within 30 days of returning from travel. Submit all forms to the Office of Public Records in 232 Hart Building.

In compliance with Rule 35.2(a) and (c), I make the following disclosures with respect to travel expenses that have been or will be reimbursed/paid for me. I also certify that I have attached:

- ☐ The original *Employee Pre-Travel Authorization* (Form RE-1), **AND**  
☐ A copy of the *Private Sponsor Travel Certification Form* with all attachments (itinerary, invitee list, etc.)

Private Sponsor(s) (list all): Pew Charitable Trusts

Travel date(s): 9/15/17 - 9/17/17

Name of accompanying family member (if any): N/A

Relationship to Traveler: ☐ Spouse ☐ Child

IF THE COST OF LODGING DID NOT INCREASE DUE TO THE ACCOMPANYING SPOUSE OR DEPENDENT CHILD, ONLY INCLUDE LODGING COSTS IN EMPLOYEE EXPENSES. (Attach additional pages if necessary.)

## Expenses for Employee:

	Transportation Expenses	Lodging Expenses	Meal Expenses	Other Expenses (Amount & Description)
<input type="checkbox"/> Good Faith Estimate <input checked="" type="checkbox"/> Actual Amount	N/A (Joe drove to the retreat)	\$143 - one night	\$128 (as priced by Pew)	valet (\$20)

## Expenses for Accompanying Spouse or Dependent Child (if applicable):

	Transportation Expenses	Lodging Expenses	Meal Expenses	Other Expenses (Amount & Description)
<input type="checkbox"/> Good Faith Estimate <input type="checkbox"/> Actual Amount				

Provide a description of all meetings and events attended. See Senate Rule 35.2(c)(6). (Attach additional pages if necessary.):

Please see attached agenda

10/16/17  
(Date)

Joe Britton  
(Printed name of traveler)

[Signature]  
(Signature of traveler)

## TO BE COMPLETED BY SUPERVISING MEMBER/OFFICER:

I have made a determination that the expenses set out above in connections with travel described in the *Employee Pre-Travel Authorization* form, are necessary transportation, lodging, and related expenses as defined in Rule 35.

10/16/17  
(Date)

[Signature]  
(Signature of Supervising Senator/Officer)